Standards-Based Management and Recognition (SBM-R)
for Service Delivery Improvement

Quality Approaches

Quality Improvement	Quality Assurance
Improvement of standards of care or compliance with standards	Assessment of organizational systems' capacity to produce services in a continuous and reliable way
Internal process	External verification
Continuous	Periodic
Examples: TQM, PI, Six Sigma, BSC	Licensing, certification, accreditation

What is SBM-R?

- Practical management approach for improving performance and quality of health services

- Based on use of operational, measurable performance standards for on-site assessment

- Must be based on local action and tied to reward or incentive program

- Consists of four basic steps

The Four Steps of SBM-R

Set Standards 1

Implement Standards 2

4 Reward Achievements

3 Measure Progress

Step One:
Set the Performance Standards

Set
Standards
1

"Operationalization" of Standards

Guidelines

("Reference" standards)

⬇

Assessment tool

(Measurable performance standards
plus verification criteria)

Performance Standards

The standards tell providers not only what to do but also **how to do it**

Tool should be a job aid

Sample Performance Assessment Tool

Area: Pregnancy Care			
Perf. Standard	**Verification Criteria**	**Y, N, NA**	**Comments**

1. The facility conducts a routine rapid assessment of pregnant women	Observe in the reception area or waiting room if the person who receives the pregnant woman:
	
	• Asks if she has or has had:
	
	   - Vaginal bleeding
	
	   - Headache or visual changes
	
	   - Breathing difficulty
	
	   - Severe abdominal pain
	
	   - Fever
	
	• Immediately notifies the health provider if any of these conditions are present
		_____
		
		_____
		
		_____
		
		_____
		
		_____
		
		_____	

Sample Performance Assessment Tool

Area: IEC and Community Participation			
Standard	**Verification Criteria**	**Y, N, NA**	**Comments**
1. **There is information available on clients' rights.**	Observe in the clinic areas whether: • There are culturally appropriate educational materials available on clients' rights with regard to HIV/AIDS • Materials are written clearly using appropriate language, or have understandable pictures for illiterates • There is information available on where to go in the event of complaints or problems related to the care received	_____ _____ _____	

Sample Summary Form of Assessment Tool for MNH Hospital

AREAS	STANDARDS
Care for pregnancy-related complications	17
Labor, delivery, immediate postpartum and newborn care	27
Support services (lab., blood bank, pharmacy)	28
Infection prevention	11
Information, education and communication	15
Human, physical and material resources	27
Management systems	14
Total	139

Step Two:
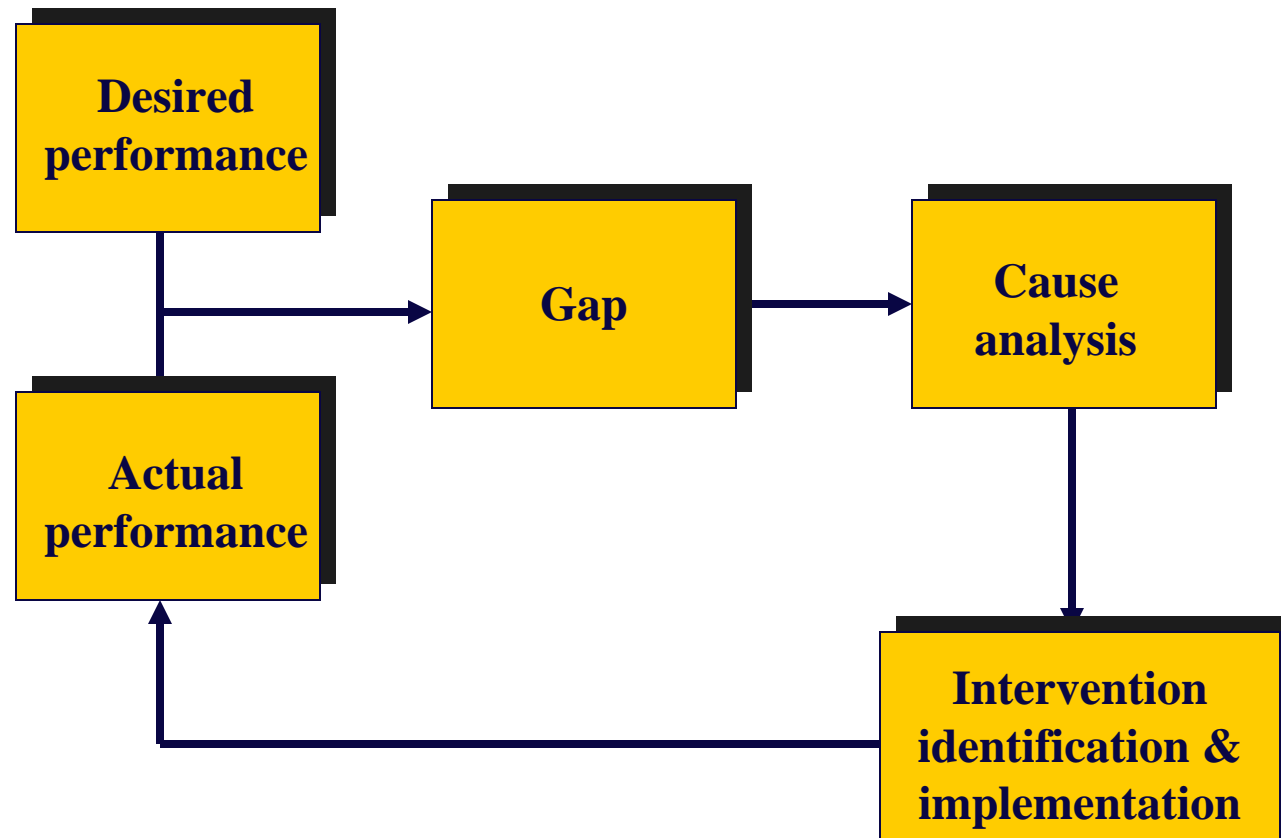# Implement the Standards

Steps to Implement Standards

- Conduct assessment
- Identify performance gaps
- Identify causes of gaps and interventions to correct them
- Implement interventions
- Begin and support change process

Implementation Cycle

```
┌──────────────┐
│   Desired    │
│ performance  │
└──────┬───────┘
       │          ┌────────┐         ┌────────────┐
       ├─────────▶│  Gap   │────────▶│   Cause    │
       │          └────────┘         │  analysis  │
┌──────┴───────┐                     └─────┬──────┘
│    Actual    │                           │
│ performance  │◀──┐                       ▼
└──────────────┘   │              ┌───────────────────┐
                   │              │    Intervention   │
                   └──────────────│  identification & │
                                  │   implementation  │
                                  └───────────────────┘
```

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In Order to Perform,
a Performer Needs To:

Know how to do

Be enabled to do

Want to do

Capability
(Know how to do) → **Knowledge, skills, information**

Opportunity
(Be enabled to do) → **Resources, tools, capacity**

Motivation
(Want to do) → **Inner drive, incentives**

Intervention Identification

| MOTIVATION | → | INCENTIVES |

| Resources, Capacity | → | Strengthening of Management Systems, Provision of Resources |

| Knowledge, Skills, Information | → | Training, Information |

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Change Management Strategy

- Important to focus on action and achievement of early results

Change Management Strategy

- The standards in the tools represent easy and hard challenges

- Changes start with the "low-hanging fruit"

- Managers and providers start with easiest tasks and then move to more difficult tasks, developing and increasing their change management skills

- Observe change process to identify new developments, initiatives and behaviors

"Multidimensional" Supervision and Support

- SBM-R process uses a variety of ways to supervise and support change process:
  - Self/internal
  - Peer/benchmarking
  - Supportive supervision (on demand), external assessment
  - Client involvement and community participation
- Bottom-up approach: based on local control, empowerment, motivation, advocacy, resource mobilization
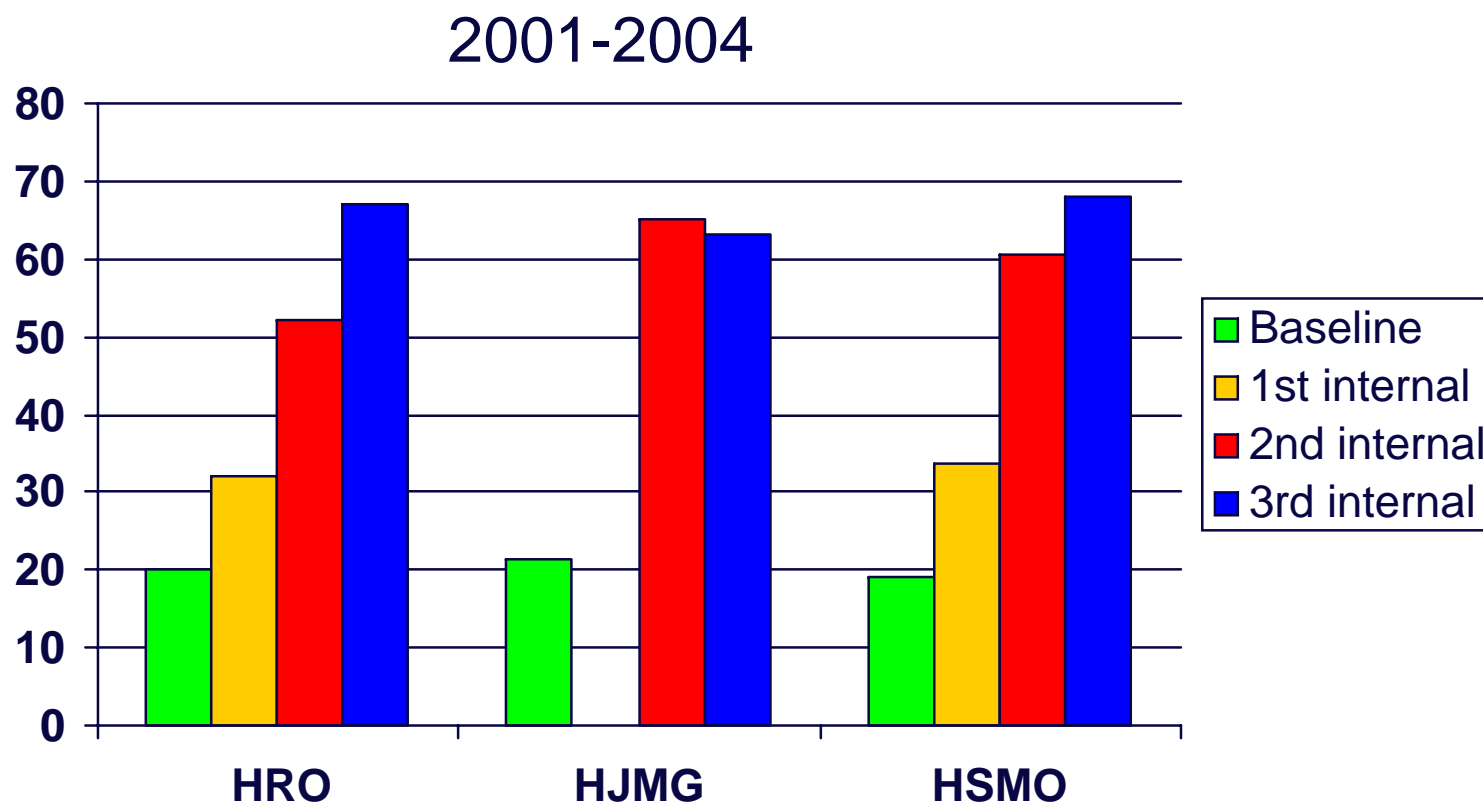
Step Three: Measure Progress

Set Standards 1

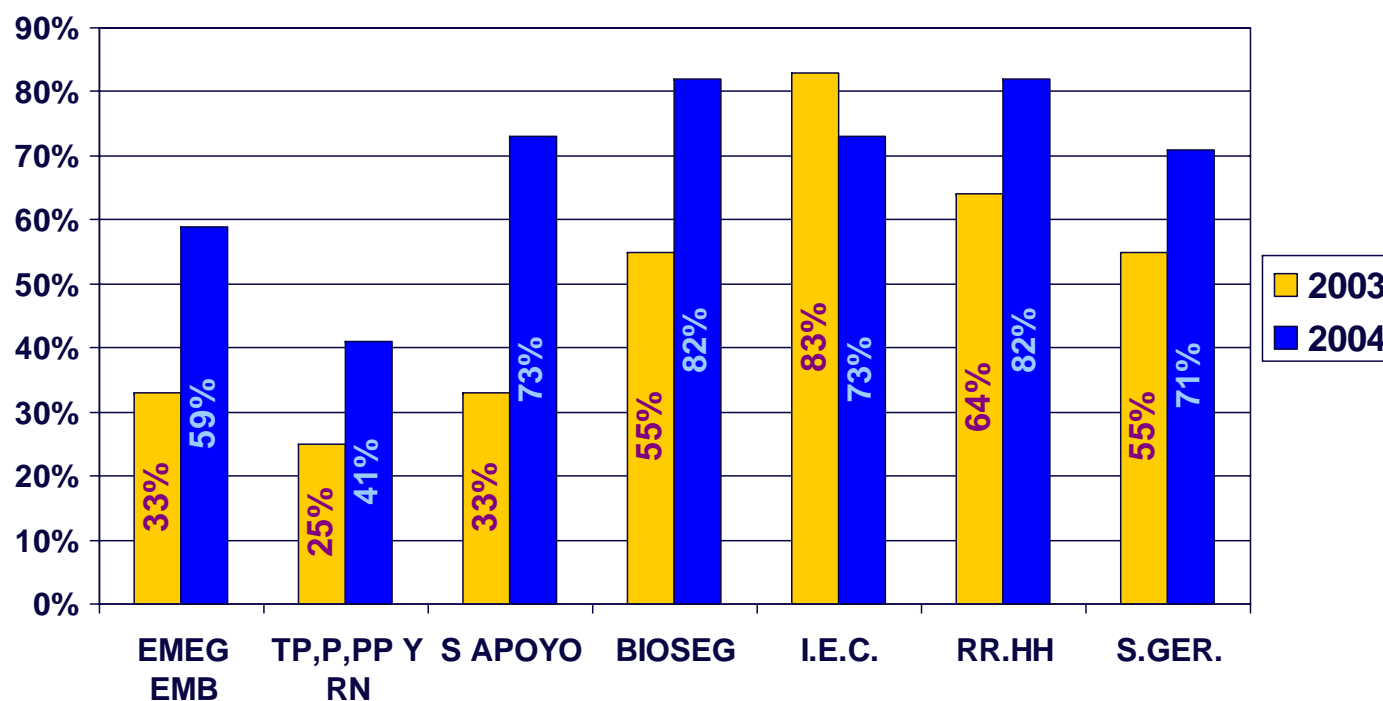Implement Standards 2
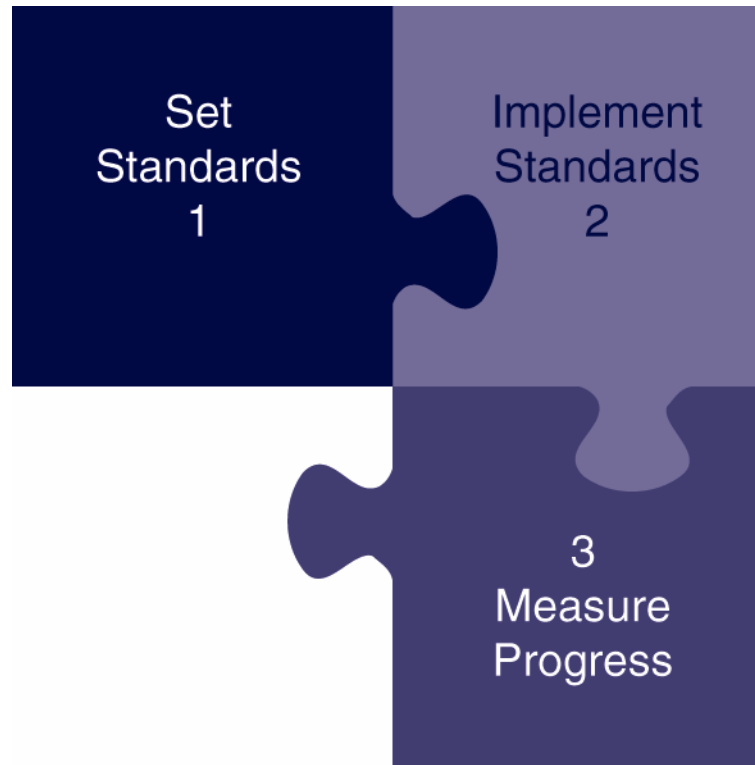
3 Measure Progress

Steps to Measure Progress

- Encourage providers to self-assess and measure progress (internal monitoring)
- Bring facilities together to share challenges and successes

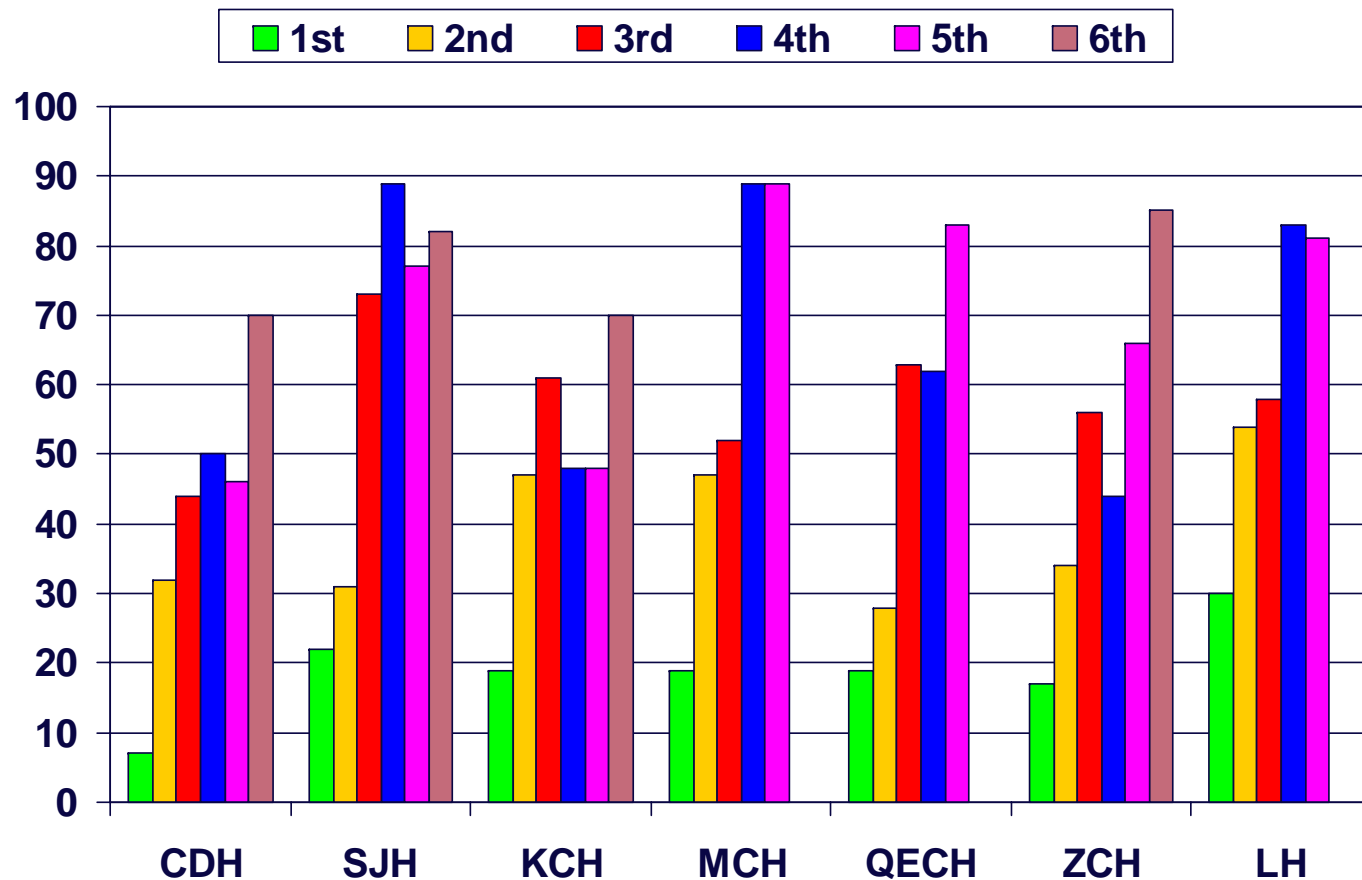# Compliance with EOC Standards: Total Results by Hospital, Honduras

2001-2004

Legend:
- Baseline (green)
- 1st internal (yellow)
- 2nd internal (red)
- 3rd internal (blue)

Categories: HRO, HJMG, HSMO

Compliance with EOC Standards: Results by Area, Honduras

Area	2003	2004
EMEG EMB	33%	59%
TP,P,PP Y RN	25%	41%
S APOYO	33%	73%
BIOSEG	55%	82%
I.E.C.	83%	73%
RR.HH	64%	82%
S.GER.	55%	71%

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Results from Seven Hospitals in Malawi, 2002-2005

Legend: 1st, 2nd, 3rd, 4th, 5th, 6th

Hospitals: CDH, SJH, KCH, MCH, QECH, ZCH, LH

PROQUALI, Brazil

Compliance with reproductive health care standards

13th Health Center-Bahia

Legend:
- Baseline (yellow)
- 12 Months (red)
- 15 Months (blue)

Categories: Total, RH Care, Infection Prevention, Counseling, Infra-structure, Management
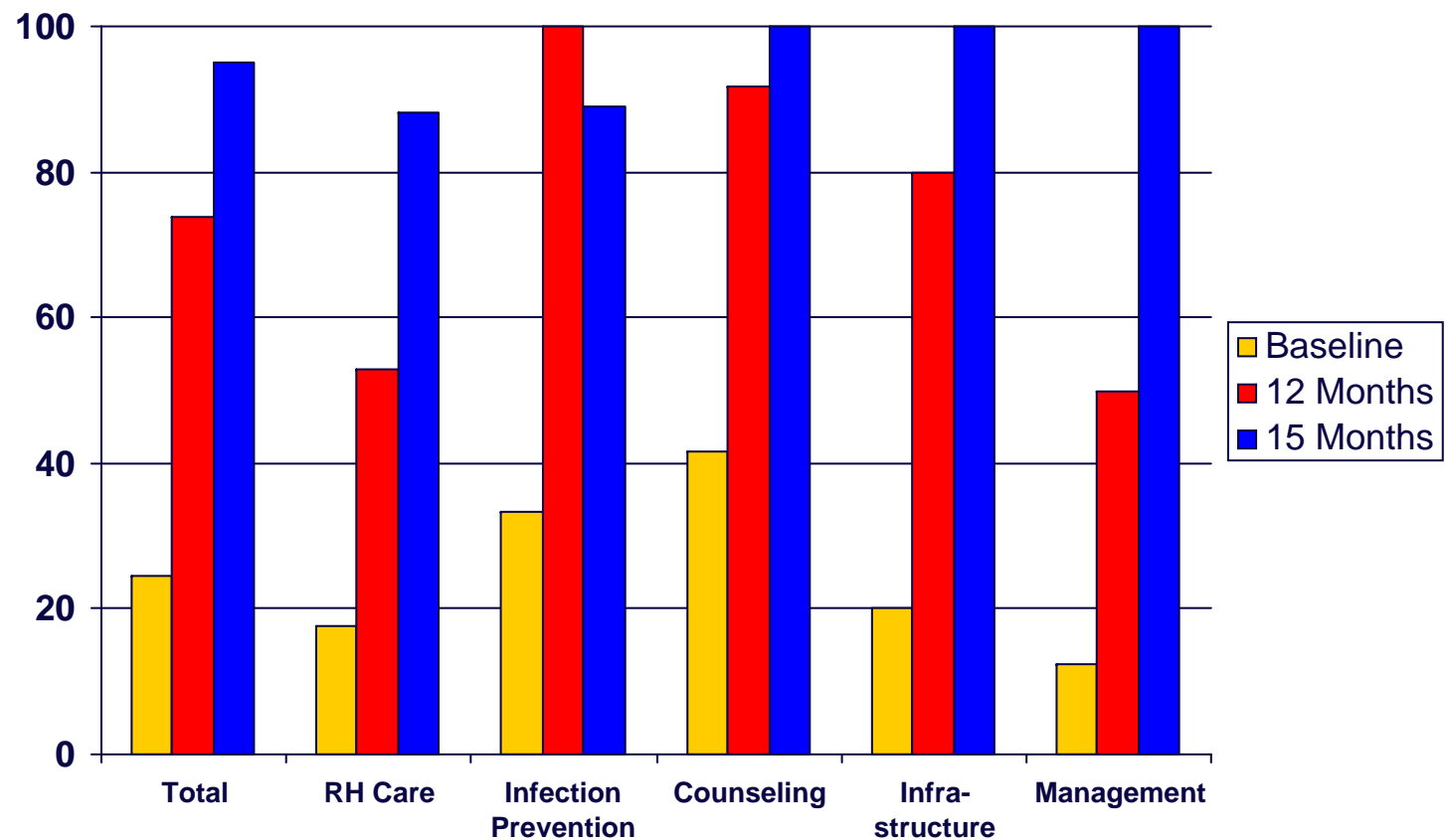
PROQUALI Brazil:
Results from Five Pilot Clinics
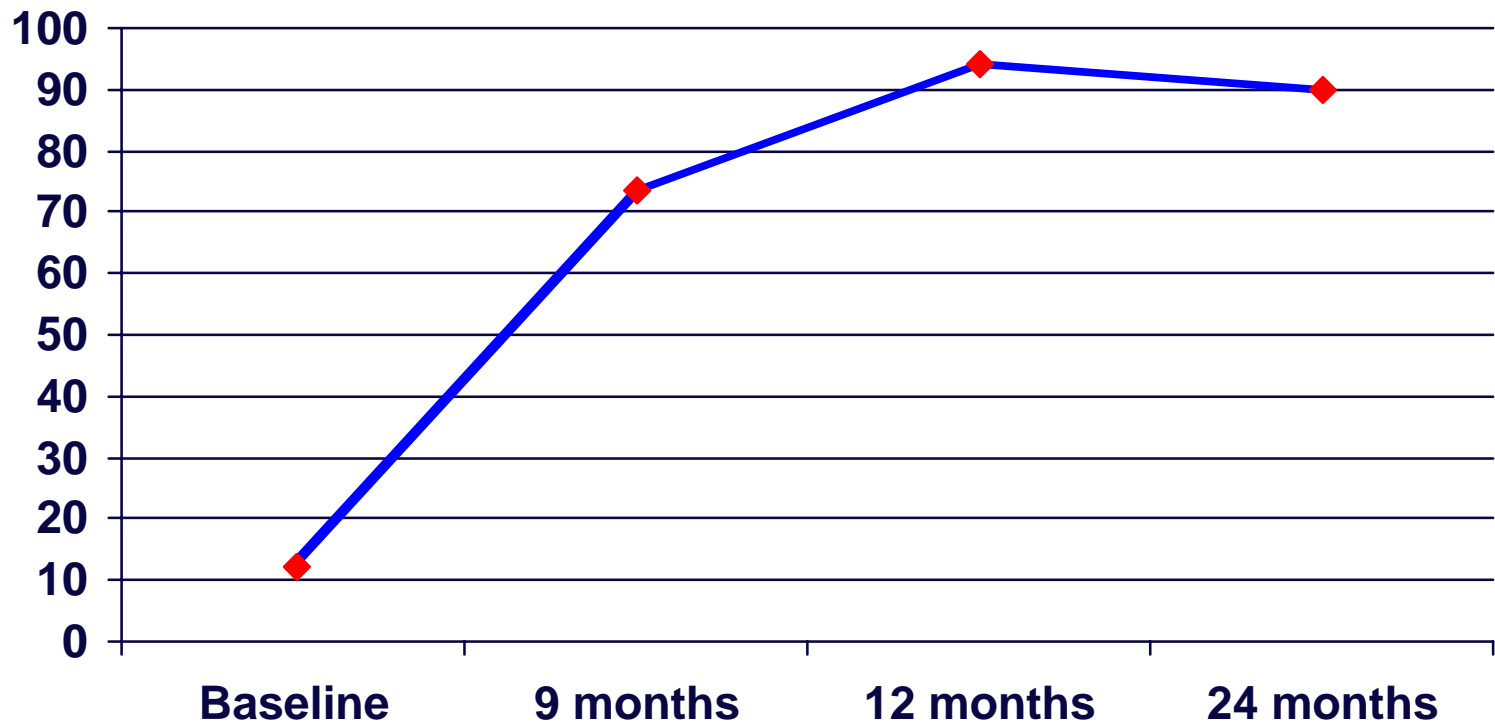
Results from Mozambique, Compliance with Standards in %, 2004-2005

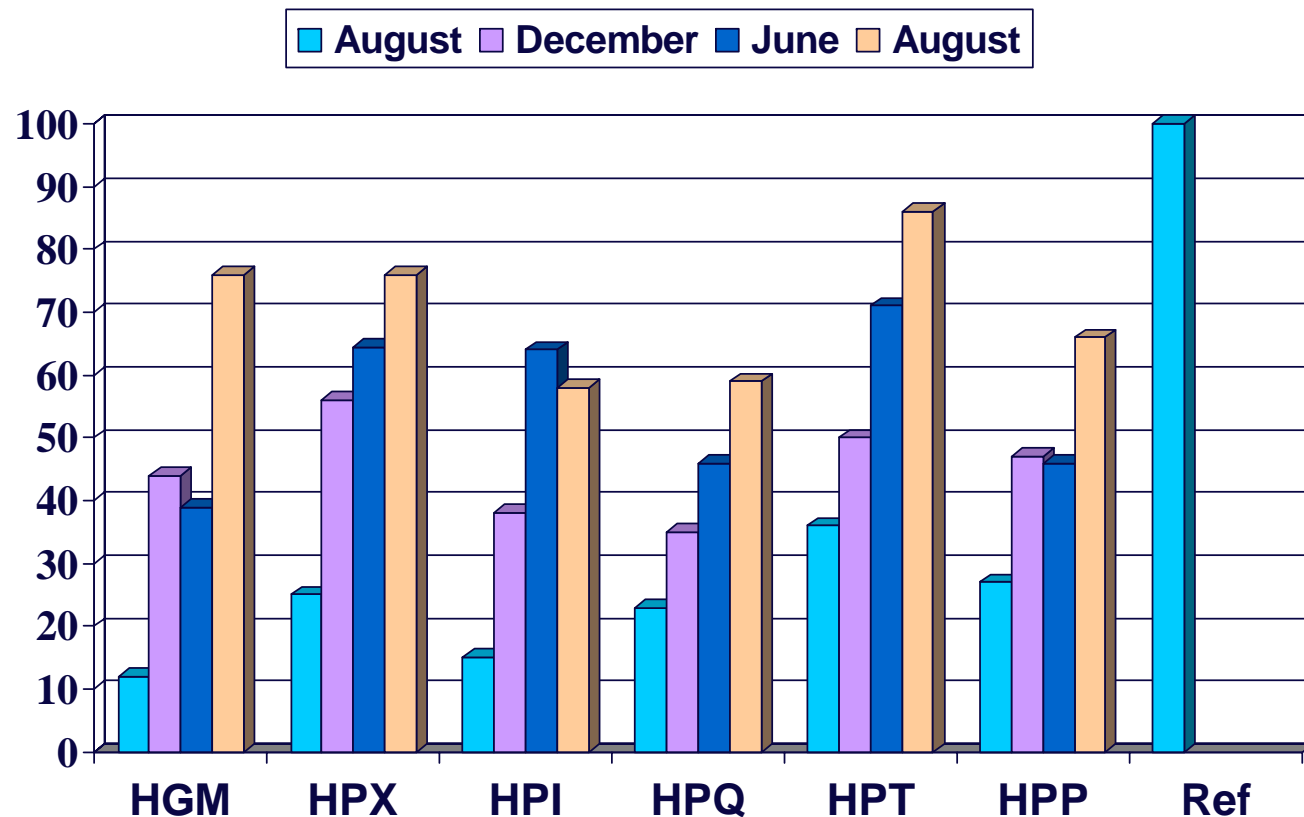Legend: ■ August ■ December ■ June ■ August

Categories: HGM, HPX, HPI, HPQ, HPT, HPP, Ref

Tabela Resumo das Avaliações em PCI desde o começo do Projecto

ÁREAS	PADRÕES (Nº)	LINHA BASE (%) Agosto 2004	1ª AVALIAÇÃ0 (%) Dezembro 2004	2ª AVALIAÇÃ0 (%) Maio 2005	3ª AVALIAÇÃ0 (%) Agosto 2005
Central Esterilização	12	18,2	27,3	75,0	83,3
Bloco Operatório	22	4,7	45,5	77,2	81,8
Enf. Tuberculose	9	0,0	37,5	44,4	55,0
Maternidade	18	5,5	38,9	88,8	55,5
Enf. Cir.Med.Ped	46	25,6	62,5	76,6	69,5
Banco Sangue	20	15,0	35,0	55,0	85,0
Estomatologia	13	7,7	30,8	53,8	30,7
Laboratório	18	0,0	27,8	55,5	94,4
Cuidados Pós-morte	12	0,0	0,0	38,4	16,6
Funções Administrativas	10	0,0	10,0	30,0	10,0
Educação do Utente	4	0,0	0,0	25,0	25,0
Cozinha	8	37,5	37,5	50,0	75,0
Lavandaria	6	33,3	33,3	66,6	50,0
Gestão do Lixo	9	44,3	44,4	66,6	77,7
TOTAL	**207**	**14,5**	**38,3**	**63,7**	**58,0**

(verde)	Progressão continuamente positiva
(amarelo)	Progressão estagnada
(laranja)	Progressão negativa

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Tete Provincial Hospital

NÃO USE HIPOCLORITO DE SÓDIO
PARA OS TECIDOS VIVOS \ COMO
ANTI-SÉPTICO

O HIPOCLORITO É CORROSIVO

USE CETRIMIDA PARA DESIN-
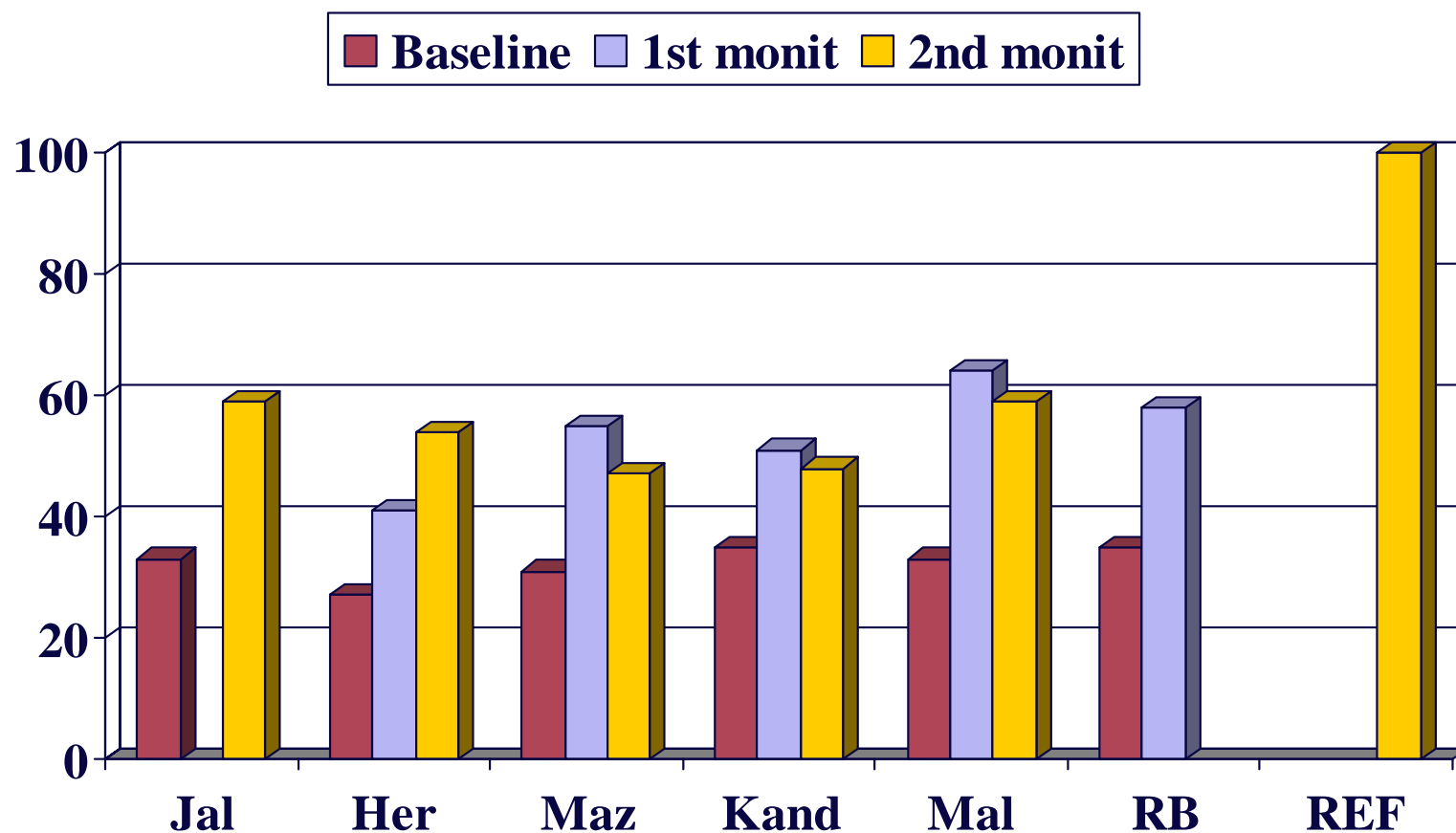FECÇÃO DOS TECIDOS VIVOS
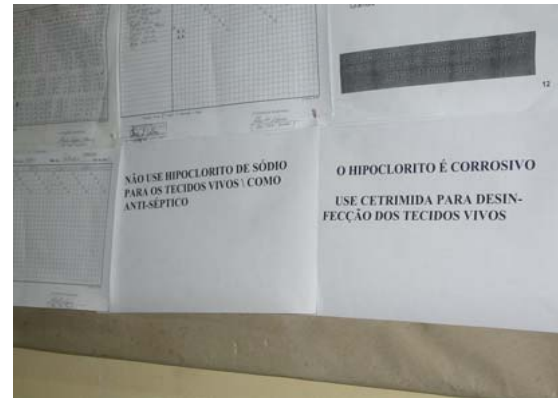
Before

After

Results from Six Midwifery Teaching Hospitals, Afghanistan, Compliance with EOC Standards in %, 2004-2005

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PATIENT PRIVACY

NEWBORN RESUSCITATION

IP PRACTICES

SIGNS FOR PATIENTS/CLIENTS

SUGGESTION BOX FOR PATIENTS/CLIENTS

Step Four: Recognize and Reward Achievements

Enhancing Motivation

- Empowerment

- Growth

- Challenges

- Achievement

- Healthy competition

- Fun

Incentives

- Feedback

- Social recognition

- Material recognition

Branding

PROQUALI

UKHONDO NDI MOYO

Internal Promotional Campaign

Celebrations, Brazil

Local Team with T-Shirts, Malawi

Conferred by the Ministry of Health to **Mzuzu Central Hospital** *in recognition of the achievement of standards of excellence in Infection Prevention practices*

Year 2004

UKHONDO NDI MOYO

Secretary for Health

Draft Outline for the ART Assessment Tool for SA

AREAS	STANDARDS
Treatment Readiness in Adults	?
Treatment Commencement in Adults	
Follow-up and Management of Complications in Adults	
Treatment Readiness in Children	
Treatment Commencement in Children	
Follow-up and Management of Complications in Children	
Laboratory	
Pharmacy	
IEC and Community Participation	
Medical Records and Information Systems	
Human and Physical Resources	
Management Systems	

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Developing and Implementing Standards For ART Services

- JHPIEGO working with Foundation for Professional Development to develop and implement ART standards

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Steps to Develop the Standards

1st Step: review of the 1st draft (what to do)
- Flow of standards
- Are the standards relevant? Do they make sense?
- Do we need to delete or to add standards?

2nd Step: add verification criteria (how to do it)
- How to verify the standards?
- Are the VC verifiable?
- When to use direct observation, clinical record/document review/interviews?
- Number of observations
- Who to observe/where?
- Make sure that there is enough information to be a job-aid but it should not become a reference manual

Steps to Develop the Standards

3rd Step: review of the 2nd draft
- Sequence
- Content
- Wording
- Client inputs
- Some formatting

4th Step: field test of the tool
- Sequence
- Is it user friendly?
- Time
- Format

Steps to Develop the Standards

5th Step: Finalize the 1st version

- Inputs from the field test
- Editing
- Formatting

There is never a final version, there is the latest version. It is a living tool!

Now, the tool is ready to be used in the baseline assessment!